STATE OF SOUTH CAROLINA	BEFORE THE PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
(Caption of Case) Example: Application for a Class C Charter Certificate from) OF SOUTH CAROLLIA
John Doe dba Doe's Limo	TRANSPORTATION COVER SHEET
Request to Amend Name on Order Before a)
Certificate has been issued	DOCKET 2013 - 190 - T
Current Name on Order: Carlos Cobb DBA)
Goodride Transportation	If this it your first time filing an application with the PSC, you will not have a Cocket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.
(Please type or print) Submitted by: Carlos Cobb	Telephone: 843-475-8474
Address: 3863 Reddin Rd Apt 2	Fax:
North Charleston, SC 29405	_ Other:
	Ema d: goodride7.cc@gmail.com aces nor supplements the filing and service of pleadings or other papers ace Commiss on of South Carolina for the purpose of docketing and must
be filled out completely. NATURE OF ACTION	ON (Check all that apply)
Application - Class A/A Restricted	Request for Name Change on Certificate
Application - Class C Taxi	Request to Amend Scope of Authority
Application - Class C Charter	Request to Amend Tariff (rate increase, etc.)
Application - Class C Charter Bus	Request to Amend Passenger Limit
Application - Class C Non-Emergency	Request
Application - Class C Stretcher Van	Exhibit
Application - Class E Household Goods	Late-Filed Exhibit
Application - Class E Hazardous Waste	Letter
Application	Proposed Order
Request for Extension to Comply with Order	Publisher's Affidavit
Request for Order Granting Authority to Obtain a Certific of Public Convenience and Necessity to be Rescinded	Response
Request for Cancellation of Certificate	Return to Petition
Request for Suspension	Other: Req to amend name on order before
Request for Reinstatement	the certificate has been issued

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.





DECLIERT TO AMEND NAME ON OR	DER BEFORE CERTIFICATE ISSUED
File the original with:	Mail or fax a copy to:
Public Service Commission of South Carolina Clerk's Office Motor Carrier Matters P.O. Box 11649 Columbia, S.C. 29211 (803) 896 – 5100 FAX (803) 896-5199	S.C. Office of Regulatory Staff Transportation Department 1401 Main Street, Suite 900 Columbia, S.C. 29201 (803) 737-0578 FAX (803) 737-0815
DATE: 7-3-13	packet # 2013-190
On 6/18/13 Order # 2013-354 was (DATE) Class C Taxi Class C Charter	issued granting a certificate for the following:
Class C Charter Bus Class C Non-Emergency	
A certificate has not been issued yet. Please con holder name that is on the above named Order to Name Change	isider this as my request to change the certificate the following:
From: Carlos Cobb	DBA: Good Ride Transportation
(Current Name) TO: <u>Carlos Cobb and David Barnes</u> D (New Name)	(Current DBA if applicable) OBA: <u>Fronsportation</u> (New DBA if applicable)
Carbs Cabb DGA Goodride Transportationer (Name & DBA if applicable) On Charleston SC 29405 April (City, State, Zip Code)	(Street and/or Mailing Address)
© 843 <175 × 474 (Telephone Number)	(Title)